

INVENTOR INFORMATION

Inventor One Given Name:: Wolfgang
Family Name:: Buchalla
Name Suffix:: Dr.
Postal Address Line One:: 702 Lockefield Court #C
City:: Indianapolis
State or Province:: Indiana
Country:: US
Postal or Zip Code:: 46202
City of Residence:: Indianapolis
State or Province of Residence:: Indiana
Country of Residence:: US
Citizenship Country:: US
Inventor Two Given Name:: Aine M
Family Name:: Lennon
Name Suffix:: Dr.
Postal Address Line One:: 702 Lockefield Court #C
City:: Indianapolis
State or Province:: Indiana
Country:: US
Postal or Zip Code:: 46202
City of Residence:: Indianapolis
State or Province of Residence:: Indiana
Country of Residence:: US
Citizenship Country:: US

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 000832
Fax One:: 219-460-1700
Electronic Mail One:: mdschwar@bakerd.com

APPLICATION INFORMATION

Title Line One:: LUMINESCENCE ASSISTED CARIES EXCAVATION
Total Drawing Sheets:: 5
Formal Drawings?: No
Application Type:: Utility
Docket Number:: ARE0005
Secrecy Order in Parent Appl.?: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 832
Registration Number One:: 26280
Registration Number Two:: 24871
Registration Number Three:: 40181
Registration Number Four:: 44326

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Registration Number Five:: 32816
Registration Number Six:: 46756
Registration Number Seven:: 46644
Registration Number Eight:: 33687
Registration Number Nine:: 18778
Registration Number Ten:: 32230
Registration Number Eleven:: 39679
Registration Number Twelve:: 40746
Registration Number Thirteen:: 32722
Registration Number Fourteen:: 37370

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